

INTERNAL REVENUE SERVICE										Document Page 1 of 5				19018 - 0000-0				FORM AD-334 USDA (REV. 8/17)	
SOCIAL SECURITY NO.		PAY PERIOD DATE MO DA YR MO DA YR				P/P	T&A CONTACT POINT		ACCT. STAT.	ORGANIZATIONAL STRUCTURE	PERSNL OFFICE	PAY PLAN	GR.	STEP					
[REDACTED]		02/23/2025 03/08/2025				04	[REDACTED]		0010	93-41-80-8039	2862	GS	08	06					
SALARY		RATE		TYPE EMPL.	SCD FOR LEAVE	RET. DEDUCTIONS THIS APPOINTMENT		STATEMENT OF EARNINGS AND LEAVE											
\$71,132.00		PA		F/T	01/12/2008	\$16,388.55													
EARNINGS AND DEDUCTIONS																			
ITEM		HOURS		AMOUNT															
CODE	DESCRIPTION	P/P	YR. TO DATE	P/P	YR. TO DATE														
01	REGULAR TIME	70.50	330.50		2,402.64	11,211.08													
11	NIGHT DIFFERENTIAL	1.00	20.50		3.41	69.91													
25	OT OVER 40 W/NIGHT DIFF	1.00	20.50		51.12	1,047.96													
34	FLSA	1.00	20.50		0.02	6.45													
61	ANNUAL LEAVE	0.50	35.50		17.04	1,203.72													
62	SICK LEAVE	9.00	28.00		306.72	946.76													
66	OTHER LEAVE		55.00			1,849.24													
66 61	TIME OFF AWARDS		31.00			1,038.80													
** **	**** PAY PERIOD HOURS & GROSS PAY ****	81.00			2,780.95	17,373.92													
75 02	RETIREMENT				84.52	503.74													
75 15	TSP-FERS				20.00	120.00													
76	*AMT BASED ON FIXED AMT SOCIAL SECURITY (OASDI)				168.91	1,056.08													
77	FEDERAL TAX EXEMPTS S03				236.03	1,569.79													
78	ST TAX PA EXEMPTS 000				83.64	522.92													
79	CITY TAX EXEMPTS PHILADELPHIA, PA				95.66	597.67													
81	FEGLI- COVERAGE \$ \$74,000				11.84	70.40													
83 10	DENTAL PLAN				39.66	238.72													
83 11	VISION PLAN				16.97	101.64													
87	UNION/ASSOCIATION DUES 10 0071				22.53	134.28													
88 40	TSP LOAN REPAY (FED)				10.00	60.00													
88 40	TSP LOAN REPAY (FED)				23.21	139.26													
97	MEDICARE TAX WITHHELD				39.50	246.98													
** **	***** TOTAL DEDUCTIONS *****				852.47	5,361.48													
** **	***** NET PAY *****				1,928.48	12,012.44													
** **	DD/EFT ROUTING NO. *****																		
YEAR TO DATE LEAVE STATUS																			
TYPE		ACCRUED	USED	BALANCE	TYPE		ACCRUED	USED	BALANCE	PROJECTED USE OR LOSE	PT. HRS UNAPP	MAX. C/O							
CREDIT HOURS-BY PAY PERIOD					ANN	32.00	26.50	29.25				24000							
RELIGIOUS COMP-BY PAY PERIOD					SICK	16	17.00	3.00				LEAVE CATEG							
TRAVEL COMP-BY PAY PERIOD					COMP			.25				8							
MILITARY					IF YOU HAVENT RECEIVED YOUR 2024 W-2, OR HAVE MISPLACED IT, YOU CAN LOG ONTO YOUR EMPLOYEE PERSONAL PAGE AT HTTPS://WWW.NFC.USDA.GOV DOWNLOAD OR PRINT YOUR W-2 SO YOU CAN FILE YOUR TAXES TIMELY. FOR ASSISTANCE CALL 866-743-5748 OPTION 1 THEN OPTION 2.														
TIME OFF AWARD																			
BPAPRA COMPENSATORY																			
BPAPRA OBLIGATED DEBT																			
DISABLED VETERAN LEAVE																			
TYPE		1ST YEAR	2ND YEAR	3RD YEAR	BALANCE	REMARKS													
REST. ANN. LEAVE HRS.																			
NAME AND ADDRESS																			

KELLY IRANA SWABY
324 LAUREL AVE
ALDAN, PA 19018-0000

Official Pay Date 03/20/2025

AGENCY HR ADDRESS
IRS OGDEN PAYROLL
CENTER
MAIL STOP 1502 P.O. 9774
OGDEN UT 84409
Phone 866-743-5748

INTERNAL REVENUE SERVICE										19018 - 0000-0		FORM AD-334 USDA (REV. 8/17)	
SOCIAL SECURITY NO.		PAY PERIOD DATE MO DA YR MO DA YR		P/P	T&A CONTACT POINT	ACCT. STAT.	ORGANIZATIONAL STRUCTURE	PERSNL OFFICE	PAY PLAN	GR.	STEP		
[REDACTED]		03/09/2025 03/22/2025		05	[REDACTED]	0010	93-41-80-8039	2862	GS	08	06		
SALARY		RATE		TYPE EMPL.		SCD FOR LEAVE		RET. DEDUCTIONS THIS APPOINTMENT		STATEMENT OF EARNINGS AND LEAVE			
\$71,132.00		PA		F/T		01/12/2008		\$16,473.07					
EARNINGS AND DEDUCTIONS													
CODE		ITEM DESCRIPTION		HOURS P/P YR. TO DATE		AMOUNT P/P YR TO DATE							
01		REGULAR TIME		63.00 393.50		2,147.04 13,358.12							
11		NIGHT DIFFERENTIAL		20.50 69.91									
25		OT OVER 40 W/NIGHT DIFF		20.50 1,047.96									
34		FLSA		20.50 6.45									
43		COMP TIME PAID		0.25 12.17									
61		ANNUAL LEAVE		10.00 45.50		340.80 1,544.52							
62		SICK LEAVE		7.00 35.00		238.56 1,185.32							
66		OTHER LEAVE		55.00 1,849.24									
66	61	TIME OFF AWARDS		31.00 1,038.80									
**	**	**** PAY PERIOD HOURS & GROSS PAY ****		80.00		2,726.40 20,112.49							
75	02	RETIREMENT				84.52 588.26							
75	15	TSP-FERS				20.00 140.00							
		*AMT BASED ON FIXED AMT											
76		SOCIAL SECURITY (OASDI)				165.53 1,222.36							
77		FEDERAL TAX EXEMPTS S03				224.03 1,796.50							
78		ST TAX PA EXEMPTS 000				81.96 605.12							
79		CITY TAX EXEMPTS				93.79 691.88							
		PHILADELPHIA, PA											
81		FEGLI- COVERAGE \$ \$74,000				11.84 82.24							
83	10	DENTAL PLAN				39.66 278.38							
83	11	VISION PLAN				16.97 118.61							
87		UNION/ASSOCIATION DUES 10 0071				22.53 156.81							
88	40	TSP LOAN REPAY (FED)				10.00 70.00							
88	40	TSP LOAN REPAY (FED)				23.21 162.47							
97		MEDICARE TAX WITHHELD				38.71 285.87							
**	**	***** TOTAL DEDUCTIONS *****				832.75 6,198.50							
**	**	***** NET PAY *****				1,893.65 13,913.99							
**	**	DD/EFT ROUTING NO. *****											
YEAR TO DATE LEAVE STATUS													
TYPE				ACCRUED	USED	BALANCE	YEAR TO DATE LEAVE STATUS				PT. HRS UNAPP	MAX. C/O	
CREDIT HOURS-BY PAY PERIOD							ANN	40.00	36.50	27.25		240 00	
RELIGIOUS COMP-BY PAY PERIOD							SICK	20	24.00	0.00		LEAVE CATEG	
TRAVEL COMP-BY PAY PERIOD							COMP					8	
MILITARY							IF YOU RECEIVE A LETTER ASKING IF YOU WANT TO TERMINATE OR CONTINUE YOUR HEALTH INSURANCE DURING NON-PAY OR EXTENDED LWOP MAKE SURE TO RESPOND IN WRITING WITHIN THE TIMEFRAME NOTED IN THE LETTER. IF A RESPONSE IS NOT RECEIVED YOUR HEALTH INSURANCE WILL BE TERMINATED RETROACTIVELY.						
TIME OFF AWARD													
BPAPRA COMPENSATORY													
BPAPRA OBLIGATED DEBT													
DISABLED VETERAN LEAVE													
TYPE				1ST YEAR	2ND YEAR	3RD YEAR	BALANCE						
REST. ANN. LEAVE HRS.													
NAME AND ADDRESS													

KELLY IRANA SWABY
324 LAUREL AVE
ALDAN, PA 19018-0000

Official Pay Date 04/03/2025

AGENCY HR ADDRESS

IRS OGDEN PAYROLL
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MAIL STOP 1502 P.O. 9774
OGDEN UT 84409
Phone 866-743-5748

INTERNAL REVENUE SERVICE										Document Page 3 of 5				19018 - 0000-0				FORM AD-334 USDA (REV. 8/17)	
SOCIAL SECURITY NO.		PAY PERIOD DATE MO DA YR MO DA YR				P/P	T&A CONTACT POINT		ACCT. STAT.	ORGANIZATIONAL STRUCTURE	PERSNL OFFICE	PAY PLAN	GR.	STEP					
[REDACTED]		02/09/2025 02/22/2025				03	[REDACTED]		0010	93-41-80-8039	2862	GS	08	06					
SALARY		RATE		TYPE EMTL.	SCD FOR LEAVE		RET. DEDUCTIONS THIS APPOINTMENT		STATEMENT OF EARNINGS AND LEAVE										
\$71,132.00		PA		F/T	01/12/2008		\$16,304.03												
EARNINGS AND DEDUCTIONS																			
ITEM		HOURS		AMOUNT															
CODE	DESCRIPTION				P/P	YR. TO DATE	P/P	YR TO DATE											
01	REGULAR TIME				58.00	260.00	1,976.64	8,808.44											
11	NIGHT DIFFERENTIAL				19.50	19.50	66.50	66.50											
25	OT OVER 40 W/NIGHT DIFF				19.50	19.50	996.84	996.84											
34	FLSA				19.50	19.50	6.43	6.43											
61	ANNUAL LEAVE				8.00	35.00	272.64	1,186.68											
62	SICK LEAVE					19.00		640.04											
66	OTHER LEAVE				9.00	55.00	306.72	1,849.24											
66 61	TIME OFF AWARDS				5.00	31.00	170.40	1,038.80											
** **	**** PAY PERIOD HOURS & GROSS PAY ****				99.50		3,796.17	14,592.97											
75 02	RETIREMENT						84.52	419.22											
75 15	TSP-FERS						20.00	100.00											
76	*AMT BASED ON FIXED AMT SOCIAL SECURITY (OASDI)						231.85	887.17											
77	FEDERAL TAX EXEMPTS S03						459.38	1,333.76											
78	ST TAX PA EXEMPTS 000						114.80	439.28											
79	CITY TAX EXEMPTS PHILADELPHIA, PA						130.59	502.01											
81	FEGLI- COVERAGE \$ \$74,000						11.84	58.56											
83 10	DENTAL PLAN						39.66	199.06											
83 11	VISION PLAN						16.97	84.67											
87	UNION/ASSOCIATION DUES 10 0071						22.53	111.75											
88 40	TSP LOAN REPAY (FED)						10.00	50.00											
88 40	TSP LOAN REPAY (FED)						23.21	116.05											
97	MEDICARE TAX WITHHELD						54.22	207.48											
** **	***** TOTAL DEDUCTIONS *****						1,219.57	4,509.01											
** **	***** NET PAY *****						2,576.60	10,083.96											
** **	DD/EFT ROUTING NO. *****																		
YEAR TO DATE LEAVE STATUS																			
TYPE		ACCRUED	USED	BALANCE	TYPE	ACCRUED	USED	BALANCE	PROJECTED USE OR LOSE	PT. HRS UNAPP	MAX. C/O								
CREDIT HOURS-BY PAY PERIOD					ANN	24.00	26.00	21.75			240 00								
RELIGIOUS COMP-BY PAY PERIOD					SICK	12	8.00	8.00			LEAVE CATEG								
TRAVEL COMP-BY PAY PERIOD					COMP			.25			8								
MILITARY					IF YOU HAVENT RECEIVED YOUR 2024 W-2, OR HAVE MISPLACED IT, YOU CAN LOG ONTO YOUR EMPLOYEE PERSONAL PAGE AT HTTPS://WWW.NFC.USDA.GOV. DOWNLOAD OR PRINT YOUR W-2 SO YOU CAN FILE YOUR TAXES TIMELY. FOR ASSISTANCE CALL 866-743-5748, OPTION 1 AND THEN OPTION 2.						REMARKS								
TIME OFF AWARD			5.00																
BPAPRA COMPENSATORY																			
BPAPRA OBLIGATED DEBT																			
DISABLED VETERAN LEAVE																			
TYPE		1ST YEAR	2ND YEAR	3RD YEAR	BALANCE														
REST. ANN. LEAVE HRS.																			
NAME AND ADDRESS																			

KELLY IRANA SWABY
324 LAUREL AVE
ALDAN, PA 19018-0000

Official Pay Date 03/06/2025

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SOCIAL SECURITY NO.		PAY PERIOD DATE MO DA YR MO DA YR		P/P	T&A CONTACT POINT	ACCT. STAT.	ORGANIZATIONAL STRUCTURE	PERSNL OFFICE	PAY PLAN	GR.	STEP		
[REDACTED]		01/26/2025 02/08/2025		02	[REDACTED]	0010	93-41-80-8039	2862	GS	08	06		
SALARY		RATE	TYPE EMPL.	SCD FOR LEAVE	RET. DEDUCTIONS THIS APPOINTMENT		STATEMENT OF EARNINGS AND LEAVE						
\$71,132.00		PA	F/T	01/12/2008	\$16,219.51								
EARNINGS AND DEDUCTIONS													
ITEM		HOURS		AMOUNT									
CODE	DESCRIPTION	P/P	YR. TO DATE	P/P	YR TO DATE								
01	REGULAR TIME	63.00	202.00		2,147.04	6,831.80							
61	ANNUAL LEAVE	9.00	27.00		306.72	914.04							
62	SICK LEAVE	8.00	19.00		272.64	640.04							
66	OTHER LEAVE		46.00			1,542.52							
66 61	TIME OFF AWARDS		26.00			868.40							
** **	**** PAY PERIOD HOURS & GROSS PAY ****	80.00			2,726.40	10,796.80							
75 02	RETIREMENT				84.52	334.70							
75 15	TSP-FERS				20.00	80.00							
	*AMT BASED ON FIXED AMT												
76	SOCIAL SECURITY (OASDI)				165.53	655.32							
77	FEDERAL TAX EXEMPTS S03				224.03	874.38							
78	ST TAX PA EXEMPTS 000				81.96	324.48							
79	CITY TAX EXEMPTS				93.79	371.42							
81	PHILADELPHIA, PA												
	FEGLI- COVERAGE \$ \$74,000				11.84	46.72							
83 10	DENTAL PLAN				39.66	159.40							
83 11	VISION PLAN				16.97	67.70							
87	UNION/ASSOCIATION DUES 10 0071				22.53	89.22							
88 40	TSP LOAN REPAY (FED)				10.00	40.00							
88 40	TSP LOAN REPAY (FED)				23.21	92.84							
97	MEDICARE TAX WITHHELD				38.71	153.26							
** **	***** TOTAL DEDUCTIONS *****				832.75	3,289.44							
** **	***** NET PAY *****				1,893.65	7,507.36							
** **	DD/EFT ROUTING NO. *****												
YEAR TO DATE LEAVE STATUS													
TYPE		ACCRUED	USED	BALANCE	TYPE		ACCRUED	USED	BALANCE	PROJECTED USE OR LOSE	PT. HRS UNAPP	MAX. C/O	
CREDIT HOURS-BY PAY PERIOD					ANN	16.00	18.00	21.75				240 00	
RELIGIOUS COMP-BY PAY PERIOD					SICK	8	8.00	4.00				LEAVE CATEG	
TRAVEL COMP-BY PAY PERIOD					COMP			.25				8	
MILITARY												REMARKS	
TIME OFF AWARD				5.00									
BPAPRA COMPENSATORY													
BPAPRA OBLIGATED DEBT													
DISABLED VETERAN LEAVE													
TYPE		1ST YEAR	2ND YEAR	3RD YEAR	BALANCE								
REST. ANN. LEAVE HRS.													
NAME AND ADDRESS													

KELLY IRANA SWABY
324 LAUREL AVE
ALDAN, PA 19018-0000

Official Pay Date 02/20/2025

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INTERNAL REVENUE SERVICE										19018 - 0000-0		FORM AD-334 USDA (REV. 8/17)	
SOCIAL SECURITY NO.		PAY PERIOD DATE MO DA YR MO DA YR		P/P	T&A CONTACT POINT		ACCT. STAT.	ORGANIZATIONAL STRUCTURE	PERSNL OFFICE	PAY PLAN	GR.	STEP	
[REDACTED]		01/12/2025 01/25/2025		01	[REDACTED]		0010	93-41-80-8039	2862	GS	08	06	
SALARY		RATE	TYPE EMPL.	SCD FOR LEAVE	RET. DEDUCTIONS THIS APPOINTMENT		STATEMENT OF EARNINGS AND LEAVE						
\$71,132.00		PA	F/T	01/12/2008	\$16,134.99								
EARNINGS AND DEDUCTIONS													
ITEM		HOURS		AMOUNT									
CODE	DESCRIPTION	P/P	YR. TO DATE	P/P	YR TO DATE								
01	REGULAR TIME	62.00	139.00		2,112.96	4,684.76							
61	ANNUAL LEAVE	9.00	18.00		306.72	607.32							
62	SICK LEAVE		11.00			367.40							
66	OTHER LEAVE	9.00	46.00		306.72	1,542.52							
66 61	TIME OFF AWARDS		26.00			868.40							
** **	**** PAY PERIOD HOURS & GROSS PAY ****	80.00			2,726.40	8,070.40							
75 02	RETIREMENT				84.52	250.18							
75 15	TSP-FERS				20.00	60.00							
	*AMT BASED ON FIXED AMT												
76	SOCIAL SECURITY (OASDI)				165.53	489.79							
77	FEDERAL TAX EXEMPTS S03				224.03	650.35							
78	ST TAX PA EXEMPTS 000				81.96	242.52							
79	CITY TAX EXEMPTS				93.79	277.63							
81	FEGLI- COVERAGE \$ \$74,000				11.84	34.88							
83 10	DENTAL PLAN				39.66	119.74							
83 11	VISION PLAN				16.97	50.73							
87	UNION/ASSOCIATION DUES 10 0071				22.53	66.69							
	DUES CHANGE												
88 40	TSP LOAN REPAY (FED)				10.00	30.00							
88 40	TSP LOAN REPAY (FED)				23.21	69.63							
97	MEDICARE TAX WITHHELD				38.71	114.55							
** **	***** TOTAL DEDUCTIONS *****				832.75	2,456.69							
** **	***** NET PAY *****				1,893.65	5,613.71							
** **	DD/EFT ROUTING NO. *****												
YEAR TO DATE LEAVE STATUS													
TYPE		ACCRUED	USED	BALANCE	TYPE		ACCRUED	USED	BALANCE	PROJECTED USE OR LOSE	PT. HRS UNAPP	MAX. C/O	
CREDIT HOURS-BY PAY PERIOD					ANN	8.00	9.00	22.75				240 00	
RELIGIOUS COMP-BY PAY PERIOD					SICK	4		8.00				LEAVE CATEG	
TRAVEL COMP-BY PAY PERIOD					COMP			.25				8	
MILITARY													
TIME OFF AWARD				5.00	SAL CHNG-\$ 69700.00PA TO\$ 71132.00								
BPAPRA COMPENSATORY					REMARKS								
BPAPRA OBLIGATED DEBT													
DISABLED VETERAN LEAVE													
TYPE		1ST YEAR	2ND YEAR	3RD YEAR	BALANCE								
REST. ANN. LEAVE HRS.													
NAME AND ADDRESS													

KELLY IRANA SWABY
324 LAUREL AVE
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Official Pay Date 02/06/2025

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